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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 10/165,460 06/07/2002 ABN
 which is a CON of 09/436,321 11/08/1999 PAT 6,401,721
 which is a CON of 09/073,336 05/05/1998 PAT 5,979,455
 which is a CON of 08/702,742 08/23/1996 PAT 5,749,375
 which is a CON of 08/391,960 02/21/1995 PAT 5,571,167
 which is a CON of 08/138,912 10/18/1993 PAT 5,456,712
 which is a DIV of 08/056,371 05/03/1993 PAT 5,304,220
 which is a CIP of 07/725,597 07/03/1991 PAT 5,211,683

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 27	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Paul K. H.</i>	Initials <i>ABP</i>		

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TITLE

Endoscopic bypass grafting method utilizing an inguinal approach

☐ All Fees

FILING FEE RECEIVED 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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